

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 6/27/02 2 Serial/Patent # 10/045,671

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
X	Petition	3	5/7/02	\$ 130.00
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$

7 TOTAL AMOUNT OF REFUND \$ 130.00

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 06--1050

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

Pg present on filing Office mistake

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: E. Shireen Willis

TITLE: Patents Atty

SIGNATURE: E. Shireen Willis

PHONE: 308-6712

OFFICE: Office of Petitions

\*\*\*\*\* THIS SPACE RESERVED FOR FINANCE USE ONLY \*\*\*\*\*

APPROVED: Glenelle

DATE: 7/5/02

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B